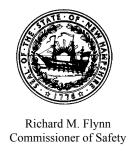
PHYSICAL EXAMINATION

| Thorax Heart | if organic o | lisease is present, is it for | ully compensated? | |
|--|---|--|--|------------------|
| Blood pressure: Systolic | | | | |
| Pulse: Before exercise | | Immediately after exer | cise | |
| Electrocadiograph | | | | |
| Abdomen Scars | | | | |
| Hernia: Yes / No If so, | | | | |
| Gastrointestinal Ulceration or other disease? | | | | |
| Genito-Urinary Scars | | Urethral discharge | | |
| Extremities Upper | Lower | | Spine | |
| Laboratory and Other Spec Urine: Spec. Gr | cial Findings: Alb | | Sugar | |
| Other laboratory data (serology, | etc.) | | | |
| Radiological data | | | | |
| Other medical history that education teacher: | | | | |
| | | ysician's Certi | | |
| nereby certify that I am fam no is an applicant for a New ysically capable of teaching termining the applicant's elig | Hampshire Driver Edu driver education. I und | acation Teacher's Cellerstand that this cert | rtificate. I further cert tification and recomme | |
| | | | (|) |
| Name of Licensed Physician | (print or type) | Title | | Telephone Number |
| License of Certificate Number | Sta | te in Which Licensed | | Expiration Date |
| Address of Licensed Physician | | | | |
| Signature of Licensed Physician | | | | Date |



State of New Hampshire

Department of Safety, Division of Motor Vehicles
Driver Education Section
10 Hazen Drive, Concord, NH 03305
(603) 271/2485

Virginia C. Beecher Director of Motor Vehicles

DRIVER EDUCATION INSTRUCTOR PHYSICAL

THE PURPOSE OF THIS EXAMINATION IS TO DETECT THE PRESENCE OF PHYSICAL DEFECTS OF SUCH CHARACTER AND EXTENT AS TO AFFECT THE APPLICANT'S ABILITY TO SAFELY ENGAGE IN THE TEACHING OF DRIVER EDUCATION.

| First Name | | MI | Last Name | | D.O.B. |
|--|---|--|--|---|---------------------------------------|
| Address | | City | | State | Zip Code |
| Height | Weight | Social Sec | curity Number | - | Driver's License Number |
| PLEASE INDIC | | SS, SURGERY OR PRI T FIVE YEARS, INCL | | | THE APPLICANT HAS |
| Diabetes Tuberculosis Gonorrhea Asthma | Rheumatic fev Gastrointestina Nervous stoma | al ulcer Cardiov ach Seizure | atric disorder or any vascular disease es, fits, convulsion, f | ainting | order |
| | Muscular disease Kidney disease | | nent defect or extens or spinal injuries | ive confinement fr | om illness, disease or inju |
| Syphilis Explanation | | | | ive confinement from | om illness, disease or inju |
| Syphilis | Kidney disease | Head o | r spinal injuries | | Reflexes |
| Syphilis Explanation Visio | Kidney disease on Without glasses | Head o Hearin Right Ear: | nr spinal injuries | Romberg_ | Reflexes Pupillary |
| Explanation Visio Vith glasses 20/ 20/ | Mithout glasses R 20/ L 20/ | Head o | n spinal injuries | Romberg Light R Accommoda | Reflexes Pupillary Light L |
| Explanation Visio Vith glasses 20/ | Mithout glasses R 20/ L 20/ | Head o Hearin Right Ear: Left Ear: Evidence of diseas | ng se / injury? | Romberg Light R Accommoda Right Knee Jerks: | Reflexes Pupillary Light L tion: Left |

(Revised 05/2003) DSMV 492